| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004         |  |  |  |                                   |  |                                  |         |                     | Application or Docket Number |                  |                            |  |
|--|--|--|--|-----------------------------------|--|----------------------------------|---------|---------------------|------------------------------|------------------|----------------------------|--|
|  |  |  |  |                                   |  |                                  |         |                     | βi                           | 10 57583>        |                            |  |
|  |  | CLAIMS   | AS FILED -   |                                   |  | (Column 2)                       |         | SMALL ENT           |                              | OR               | OTHER THAN OR SMALL ENTITY |  |
| U.S  | . NATIONAL                                     | STAGE FEES   | (Goldmin 1)  |                                   |  |                                  | 1       | RATE                | FEE                          | 7 .              | RATE                       | FEE  |
| BASIC FEE  |  |  | SMALL ENT. ≈ \$ 150  |                                   | LAR                                    | GE ENT. = \$ 300                 | 1       | BASIC FEE           |                              | OR               | BASIC FEE                  | <del>                                     </del> |
| EXAMINATION FEE  |  |  | Satisfies PCT Article 33(1)-<br>(4) = \$50 / \$ 100                    |                                   |  | ther situations = 5 100 / \$ 200 | 1       | EXAM. FEE           |                              | 1                | EXAM. FEE                  | 00E  |
| SEARCH FEE   |  |  | U.S. Is ISA = \$50 / \$100<br>ALL other countries = .<br>\$200 / \$400 |                                   | All other situations = \$ 250 / \$ 500 |                                  |         | SEARCH FEE          |                              |                  | SEARCH FEE                 | 100  |
| FEE FOR EXTRA SPEC. PGS.   |  |  | minus 100 =  |                                   |  | / 50 ≐                           |         | X \$ 125 =          |                              |                  | X \$ 250 =                 | 1  |
| TOTAL CHARGEABLE CLAIMS  |  |  | minus 20 =   |                                   | *                                      |                                  |         | X \$ 25 =           |                              | OR               | X \$ 50 =                  |  |
| INDEPENDENT CLAIMS   |  |  | ) minus 3 = ,  |                                   | *                                      |                                  | 1       | X \$ 100 =          |                              | OR               | X \$ 200 =                 | 1  |
| MUL  | TIPLE DEPEN                                    | DENT CLAIM PR  | RESENT   |                                   |  |                                  |         | + \$ 180 =          |                              | OR               | + \$ 360 =                 |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL |  |  |  |                                   |  |                                  | TOTAL   |                     | OR                           | TOTAL            |                            |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) SMAI             |  |  |  |                                   |  |                                  | SMALL E | NTITY               | OR                           | OTHER<br>SMALL E |                            |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |  | HIGH<br>NUMI<br>PREVIC<br>PAID    | BER<br>DUSLY                           | PRESENT<br>EXTRA                 |         | RATE                | ADDI-<br>TIONAL<br>FEE       |                  | RATE                       | ADDI-<br>TIONAL<br>FEE                           |
|  | Total  | *  | Minus ,  | **                                |  | =                                |         | X \$ 25 =           |                              | OR               | X \$ 50 =                  |  |
|  | Independent                                    | *  | Minus  | ***                               |  | =                                |         | X \$ 100 =          |                              | OR               | X \$ 200 =                 |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |                                   |  |                                  |         | + \$ 180 =          |                              | OR               | + \$ 360 =                 |  |
| ,  |  |  |  |                                   |  |                                  |         | TOTAL ADDIT.<br>FEE |                              | OR               | TOTAL ADDIT.<br>FEE        |  |
|  |  | (Column 1)   |  | (Colun                            | nn 2)                                  | (Column 3)                       |         |                     |                              |                  |                            |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |  | HIGHI<br>NUME<br>PREVIO<br>PAID I | BER<br>USLY                            | PRESENT<br>EXTRA                 |         | RATE                | ADDI-<br>TIONAL<br>FEE       |                  | RATE                       | ADDI-<br>TIONAL<br>FEE                           |
|  | Total  | *  | Minus  | **                                |  | =                                |         | X \$ 25 =           |                              | OR               | X \$ 50 =                  |  |
|  | Independent                                    | *  | Minus  | ***                               |  | =                                |         | X \$ 100 =          |                              | OR               | X \$ 200 =                 |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |                                   |  |                                  |         | + \$ 180 =          |                              | OR               | + \$ 360 =                 |  |
| TOTAL ADDIT.<br>FEE  |  |  |  |                                   |  |                                  |         |                     |                              | OR               | TOTAL ADDIT.<br>FEE        |  |
|  | •  |  | . '  | •                                 |  |                                  |         |                     | <i>-</i> -                   |                  |                            |  |
| **   | If the "Highest Nu<br>If the "Highest Nu       | imn 1 is less than th<br>imber Previously Pa<br>imber Previously Pa<br>inber Previously Paic | id For" IN THIS SF<br>id For" IN THIS SF                               | PACE is less<br>PACE is less      | than '20<br>than '3',                  | )', enter "20".<br>enter "3".    | in the  | appropriate box     | in column 1.                 |                  |                            |  |